RCRIS DATA CORRECTION CLOSE-OUT LOG

FORM ID:MO0258

Data Verification Form LQG, Missouri LQG

HID_NUM: MOD006299200

MOID: 001911

_____ No change in RCRIS data.

Revise Generation size category per the following documentation

_____ Data Verification Form (copy follows)

X 1991 Biennial Report Form IC, Section VI

RCRIS FIELD NAME

REVISED DATA

HGEN

Revise name/address contact information.

RCRIS FIELD NAME

REVISED DATA

HHANDLER

HMAILSTRT1:

HMAILSTRT2:

HMAIL CITY:

HMAIL STATE:

HMAIL ZIP

HLOCSTRT1

HLOCSTRT1

HLOC_CITY HLOC_ZIP

HCONT FIRST

HCONT_I INDI

HCONT_LAST :

HCON_TITL

HCONT PHONE:

Comments:

GENERATOR DATA VERIFICATION FORM		FORM ID: MO0258	
INFORMATION box. Then, CHECK THE AP certification statement in the lower lost, mail the form to: DPR Dep PO	PROPRIATE BOXES in the GENERATI	ox and provide any corrections in the <u>REVISED</u> <u>CON OF WASTE</u> section; finally, please sign the a the enclosed envelope. If the envelope has been	
The accompanying correspondence provides instructions.		MAR 2	
For assistance, please contact: Har DPR Pho	old Vandeventer A Incorporated ne: (913) 539-3565	Pirat	
CURRENT INFORMATION		REVISED INFORMATION	
EPA ID: MOD006299200 NAME: SPORLAN VALVE COMPANY			
MAILING ADDRESS 611 E 7TH ST			
WASHINGTON	MO, 63090		
PHYSICAL LOCATION ADDRESS 611 E 7TH ST			
	MO, 63090		

- Q 1: Is this facility a generator of hazardous waste as defined by 40 CFR Part 261 (as amended 07/01/91)? Yes (go to Q 2)

 No (complete certification statement and place in mail)
- Q 2: In any single month during 1991, this facility generated (check as many boxes as applicable): 1,000 Kg (2,200 lb) or more of non-acutely hazardous waste or, 1 Kg (2.2 lb) or more of acutely hazardous waste, ☐ 100 Kg (220 lb) or more, but less than 1,000 Kg (2,200 lb) of non-acutely hazardous waste, less than 100 Kg (220 lb) of non-acutely hazardous waste.

CERTIFICATION STATEMENT

The owner or operator of the facility, or an authorized representative, must sign and date the certification below. The printed or typed name of the person signing the certification must also be included where indicated.

<u>CERTIFICATION:</u> I certify that I am familiar with the information submitted on this form and that I believe the information to be true and accurate.

Print/type name